&/							
2004 E	ction Act of 1995	i no nersons are requi	ired to resi		nd Trade	mark Office; U.S. DE	PTO/SB/17 (12-04 n 07/31/2006, OMB 0651-003; PARTMENT OF COMMERCE s a valid OMB control number
Effective on 12/08/2004.				Complete if Known			
Fees pursuant to the Conso.			9	Application Number	er 1	10/614,574	
FEE TF	RANS	MILLA	L	Filing Date	١.	July 2, 2003	
Fo	or FY 2	005		First Named Inven	ntor	Keith Phillip Laby	
				Examiner Name		Shik Luen Paul Ip	
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	:	2837	
TOTAL AMOUNT OF PA	YMENT (\$)	0.00		Attorney Docket N	lo. 1	157438-0014 (P007	7)
METHOD OF PAYME	NT (check all	that apply)					
			٦				
Check Credit Card Money Order Other (please identify):							
I	Deposit Account Deposit Account Number: 09-0946 Deposit Account Name: Irell & Manella LLP						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated be	elow		Charge f	fee(s) ir	ndicated below, ex	cept for the filing fee
	additional fee	(s) or underpaymen	ts of fee((s) 🔽 Credit aı	ny over	payments	
WARNING: Information on ti	his form may be	come public. Credit	card info	rmation should not	be inclu	ded on this form. Pr	ovide credit card
Information and authorization FEE CALCULATION	n on PTO-2038	•					
1. BASIC FILING, SEA	ARCH, AND I FILING I			CH FEES E	=XAMI	NATION FEES	
Application Type	<u>S</u>	mall Entity	_	Small Entity		Small Entity	Fees Paid (\$)
Application Type Utility	<u>Fee (\$)</u> 300	<u>Fee (\$)</u> 150	Fee (\$) 500	<u>Fee (\$)</u> 250	Fee (\$		<u>rees Falu (\$)</u>
Design	200	100	100	50	130	100 65	
Plant	200	100	300	150	160		
Reissue	300	150	500		600	80	
Provisional	200	100	0	250		300	
2. EXCESS CLAIM FE		100	U	0	0	0	Small Entity
Fee Description							
	Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100						
Multiple dependent claim		or Reissues, each	ındeper	ident claim more	e than	in the original pa	atent 200 100 360 180
Total Claims	Extra Claim	s Fee (\$)	Fee Pa	aid (\$)	Multiple	e Dependent Clair	
- 20 or HP =		x =	-		Fee		 aid (\$)
HP = highest number of tota Indep. Claims	al claims paid for Extra Claims		Fee Pa	aid (\$)			
3 or HP =		_x=					
HP = highest number of inde	•	paid for, if greater than	n 3				
3. APPLICATION SIZE		wood 100 sheets	ofnanc	ar the annlication	n ciza	faa dua is \$250 ((\$125 for small antity)
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Shee		of each	additional 50 or f	raction	thereof Fee	
100 =		/ 50 =		(round up to a who	ole num	nber) x	=
4. OTHER FEE(S)			_				Fees Paid (\$)
Non-English Specia	fication, \$1	30 fee (no small	entity d	iscount)			
Other:							

SUBMITTED BY							
Signature	Ren apple	Registration No. (Attorney/Agent) 33,609	Telephone 949-760-0991				
Name (Print/Type)			Date December 15, 2004				

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application for the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

H/ITS

re Application of:

Keith Phillip Laby

Application No.: 10/614,574

Filed: July 2, 2003

For: HOLONOMIC PLATFORM FOR

A ROBOT

Examiner: Shik Luen Paul Ip

Art Group: 2837

AMENDMENT UNDER 37 C.F.R. §1.116

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated October 27, 2004, please amend the above-entitled application as follows.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 9 of this paper.